



Tommy Irvin  
Commissioner

# Georgia Department of Agriculture

Pesticide Division, 19 M.L.K. Jr. Drive, S.W., Room 550  
Atlanta, Georgia 30334-4201

Dear Registrant:

I am pleased to enclose the information you will need to register your pesticide products in the State of Georgia.

Please complete the enclosed *Pesticide Product Registration Application*. This application must be accompanied by one copy of complete labeling which has been approved by E.P.A. to accompany your product. You must also submit a registration fee of \$100.00 per product. Separate registration is required for identical products with different labels.

If you are a non-resident registrant, you will be required to appoint an *Attorney-In-Fact* form for the purpose of receiving any service of legal process which might become necessary. Georgia law provides that you may appoint the Georgia Secretary of State to serve you in this capacity. There is no fee for this service, however, you must complete the enclosed form in detail and have it notarized. If you are a resident registrant and have never registered products within the State of Georgia, please complete the *Resident Agent* form.

If you have any questions or concerns after reading the enclosed material, please call me at 404/656-9378, fax: 404-657-8378 or you may email me at [http://www.blee@agr.state.ga.us](mailto:http://www.blee@agr.state.ga.us)

Sincerely,

***Bernetta Lee***

Pesticide Product Registration

Enclosures:     Attorney-In-Fact Form  
                      *Resident Agent Form*  
                      Pesticide Product Registration Application

*Georgia Pesticide Control Act of 1976*  
*Instruction Sheet*

# INSTRUCTIONS FOR ANNUAL RENEWAL OF PESTICIDES IN GEORGIA

Please read the following information carefully. If you have any further questions, please direct your questions or comments to Bernetta Lee at 404/656-9378.

## RENEWALS WITH CHANGES / ADDITIONS

### Discontinued Products:

Draw a line through the product name and EPA registration number on the computer sheet for products which have been discontinued for two years.

- You must pay for products during the two-year discontinued period.
- If you sell directly to the user a two-year discontinued period is not required.

### New Products:

File a separate *Pesticide Registration Application* (one set enclosed) listing all new products.

- Submit one copy of complete EPA approved labeling along with any pamphlets or other materials which will be distributed at point of sale.
- Include a fee of \$100.00 per product.
- Late fees are not charged for new products.

## RENEWALS WITH NO CHANGE

Sign and print your name on the enclosed computer sheet on the bottom left hand corner and mail it to the address below before January 31, 2007.

- Include a \$100.00 registration fee for each product. Separate checks for each company are preferred.
- Add your current phone number, FAX number and Email address (if any) near your name to speed the handling of any problems.

## REVISED LABELING

Please send one copy of each revised label, highlighting or underlining the revisions made. If you include a cover sheet to indicate the changes, please attach a copy of this cover sheet to each set of labels.

## LATE FEES

Normally requests for renewals postmarked after December 31<sup>st</sup> of any registration year will be charged a late fee of \$100.00 per product. However, for the 2006 registration year **only** an exception will be made to extend the deadline to January 31, 2006.

## ATTORNEY-IN-FACT FORM / RESIDENT AGENT FORM (New Registrant Information)

- Complete the *Attorney-in-Fact* form if <sup>(1)</sup>you are a non-resident registrant, <sup>(2)</sup>have never registered products within the State of Georgia and <sup>(3)</sup>you have an agent within the State of Georgia who represents your company for the purpose of receiving any service of legal process which might become necessary.
- Complete the *Resident Agent* form if you <sup>(1)</sup>have never registered products within the State of Georgia and <sup>(2)</sup>you are a resident registrant.

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**Return Forms to:** Georgia Department of Agriculture  
Pesticide Division, Room 550  
19 Martin Luther King Jr. Drive  
Atlanta, Georgia 30334  
ATTN: Bernetta Lee



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Atlanta, Georgia 30334-4201

## Electronic Renewal Option

For the 2006 registration period the Georgia Department of Agriculture is allowing service organizations to electronically renew pesticide registrations. Supporting documentation in PDF format, including pesticide labels, may be submitted to us by e-mail or other electronic means. Or, you may contact one of the service organizations listed below.

The standard paper renewal option remains available for companies that do not wish to renew electronically.

**The Georgia Department of Agriculture does not recommend or endorse the services organizations listed below, nor does it recommend or endorse the services or information provided by such organization, nor guarantees the results from the services offered. Such organizations are listed purely upon their individual CLAIM to be able to provide the services indicated. No registration or renewal is effective until it has met all the requirements of the Georgia Department of Agriculture and has been actually accepted (not just received) by it, whether individually submitted or submitted by a third party service organization, and whether in standard paper or electronic format.**

### Kelly Registration Systems

<http://www.kellysolutions.com>

### Registration and Licensing Systems, Inc.

<https://rlssecure.com>



# Georgia Department of Agriculture

Pesticide Division, 19 M.L.K. Jr. Drive, S.W., Room 550

Atlanta, Georgia 30334-4201

404-656-4958; Fax: 404-657-8378

**FILE IN DUPLICATE**

Thomas T. Irvin  
Commissioner

Application Date: \_\_\_\_\_

## PESTICIDE PRODUCT REGISTRATION APPLICATION

**PRODUCT: Brand Name of Product as it Appears on Label (Print or Type)** **EPA Registration Number**

01. \_\_\_\_\_
02. \_\_\_\_\_
03. \_\_\_\_\_
04. \_\_\_\_\_
05. \_\_\_\_\_
06. \_\_\_\_\_
07. \_\_\_\_\_
08. \_\_\_\_\_
09. \_\_\_\_\_
10. \_\_\_\_\_

**Fee is \$100.00 per product per year. Attach one copy of final printed label for each product.**

Company Name: (Register Products To): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

### **SUBMITTED BY**

Company Name: (Mail Registration To): \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax: \_\_\_\_\_ E-Mail: \_\_\_\_\_

Contact Person (Print Name) \_\_\_\_\_ Signature: \_\_\_\_\_

### **CERTIFICATE OF REGISTRATION**

This registration expires on December 31<sup>st</sup> but, for so long as appropriate fees thereon are paid, may be deemed to be renewed from fiscal year to fiscal year unless surrendered, abandoned, revoked or cancelled or unless the Commissioner of Agriculture shall require at any time a new application for any annual renewal thereof. (If all renewal fees are not paid prior to January 1<sup>st</sup>, the registration fee shall double and shall be paid by the applicant before renewal is issued.)

### **GEORGIA REGISTRATION (Office Use Only)**

Registration Year	Date	Voucher No.	Check No.	Amount
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<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
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Application Approved by: \_\_\_\_\_ Date Approved: \_\_\_\_\_

STATE OF GEORGIA  
GEORGIA DEPARTMENT OF AGRICULTURE  
Atlanta, Georgia

Resident Agent Form

In accordance with the provisions of the Department of Agriculture Registration, License and Permit Act, \_\_\_\_\_, a resident of the State of Georgia, is hereby designated and appointed as our true Attorney-in-Fact to accept legal process and service in accordance with the provisions of said Act, for and in our behalf, the same as if served on us in the State and County of our residence.

If at any time the Commissioner of Agriculture of Georgia should desire to serve such legal process or service on us and the said \_\_\_\_\_ should for any reason not be available for such, then and in that event, it is hereby agreed that we will name another Attorney-in-Fact within 10 days after notice from the Commissioner of Agriculture on whom such service may be had.

DATE: \_\_\_\_\_  
\_\_\_\_\_  
(Firm Name)

WITNESS: \_\_\_\_\_  
\_\_\_\_\_  
(Name and Official Position of Person Signing)

\_\_\_\_\_  
Notary Public (Seal)

\_\_\_\_\_  
(Mailing Address)

\_\_\_\_\_  
(City) (State) (Zip Code)

\* \* \* \* \*

Georgia, \_\_\_\_\_ County

Date: \_\_\_\_\_

I, \_\_\_\_\_, a resident of the State of Georgia do hereby accept appointment as Attorney-in-Fact for \_\_\_\_\_.

To accept service in any legal proceedings instituted against said \_\_\_\_\_, in accordance with all the terms of the Department of Agriculture Registration, License and Permit Act pertaining to the registration and sale of feeds and feedingstuffs, fertilizers, and economic poisons.

WITNESS:

\_\_\_\_\_  
Notary Public (Seal)

\_\_\_\_\_  
(Appointee's Signature)

\_\_\_\_\_  
(Address)

Date: \_\_\_\_\_  
\_\_\_\_\_  
(City) (State) (Zip Code)

SECRETARY OF STATE  
CONSENT TO SERVICE OF PROCESS  
DEPARTMENT OF AGRICULTURE REGISTRATION, LICENSE AND PERMIT ACT

Attorney-in-Fact Form

KNOW ALL MEN BY THESE PRESENT:

That \_\_\_\_\_, a corporation organized and existing under and by virtue of the laws of the State of \_\_\_\_\_, does hereby appoint the Secretary of State of the State of Georgia as its attorney-in-fact, as follows:

RESOLUTION:

For the purpose of complying with Section 3 of the Department of Agriculture Registration, License and Permit Act of 1966 approved March 10, 1966 (Georgia Laws, 1966, pps 307-310), \_\_\_\_\_ does hereby appoint the Secretary of State of the State of Georgia, or his successor in office, as its true and lawful attorney-in-fact upon whom may be served any summons or process in any action or proceeding against it in any court or administrative tribunal of competent jurisdiction of the State of Georgia or before the Commissioner of Agriculture of the State of Georgia and does hereby consent and agree that the service of said summons or process on the Secretary of State shall be of the same legal force and validity as if due service had been made upon it within the State of Georgia, and the said corporation does hereby direct that the Secretary of State forward the said summons or process to it at the following address: \_\_\_\_\_.

*Street Address Only (No Post Office Box Number)*

IN WITNESS WHEREOF, said corporation, in accordance with authority granted by the foregoing resolution of its Board of Directors, has caused this instrument to be executed by its president and secretary and its corporate seal to be affixed this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

\*(CORPORATE SEAL)

By: \_\_\_\_\_  
*President*

By: \_\_\_\_\_  
*Secretary*

\*\*\*\*\*

(STATE OF: \_\_\_\_\_ )

(COUNTY OF: \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_, before me a notary public in and for said county and state, personally appeared \_\_\_\_\_ (President) and \_\_\_\_\_ (Secretary) to me known to be the persons described in and who executed the foregoing instrument and who, being by me first sworn, did say that they are the president and secretary, respectively, of the Corporation described in the foregoing instrument, that the seal affixed to said instrument is the corporate seal of the said Corporation by authority of its Board of Directors, and that the averments contained therein are true and correct.

\*(NOTARIAL SEAL)

\_\_\_\_\_ Notary Public

My Commission Expires \_\_\_\_\_

(Please fill in every blank)

\*(Affix seal or write "NONE")